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**APPLICANTS**  
 Nereo Pallaro, Orbassano, ITALY;  
 Filippo Visintainer, Orbassano, ITALY;  
 Piernario Repetto, Torino, ITALY;  
 Elena Borello, Rubiana, ITALY;  
 Bartolomeo Pairetti, Barge, ITALY;  
 Stefano Bernard, Torino, ITALY;

**\*\* CONTINUING DATA \*\*\*\*\*** *None SE*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *yes SE*  
 ITALY TO2002A000950 11/05/2002

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 02/03/2004**

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> ITALY	<b>SHEETS DRAWING</b> 14	<b>TOTAL CLAIMS</b> 26	<b>INDEPENDENT CLAIMS</b> 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>S. J. [Signature]</i>	Examiner's Signature	Initials <i>SE</i>		

**ADDRESS**  
23373

**TITLE**  
Multifunctional integrated visual system with CMOS or CCD technology matrix

<b>FILING FEE RECEIVED</b> 878	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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